DISCLOSURE OF INTEREST

Section A – General Information			
Name:		- <u>-</u> -	Employee #:
Last Bureau:			l.I.
Civil Service Cla			
Working Title of	Position:		
Name / Title of	Immediate Supervisor:		
J	Position Responsibilities (Ch	eck where appropriate): Enforcement Responsibilities	Purchasing Responsibilities
Contra	acting Responsibilities	Examination Responsibilities	Regulatory Responsibilities
I have received and read a copy of the Department of Labor & Economic Growth Code of Ethics. I have no personal or financial interests nor does any member of my immediate family have such interests in any business or entity for which my responsibilities as an employee of the Department of Labor & Economic Growth might conflict. I certify that the above answers are accurate and complete. Signature: Date:			
Section C - Dis	sclosure of Interest		
Nature of Interest(s):			
How and When was Interest Acquired: Amount or Extent of Interest:			
I have received and read a copy of the Department of Labor & Economic Growth Code of Ethics. I certify that the above answers are accurate and complete. Signature: Date:			
Bureau Remarks:			
Approved: (Use only when Section C is completed.)			
-	Bureau Director Signature		Date
-	OHR Director		Date

Instructions for Completing Disclosure of Interest Form

If there are NO disclosures to be reported:

- 1. Complete Section A General Information
- 2. Complete Section B Disclaimer. Sign form and send to Department of Labor & Economic Growth, Human Resources

If there are disclosures to be reported:

- 1. Complete Section A General Information
- 2. Complete Section C Disclosure of Interest. Sign form and send to Bureau Director for approval. Bureau Director forwards to Department of Labor & Economic Growth, Office of Human Resources for approval.